



# CG-9, SINGLE EVENT LICENSE FINANCIAL REPORT

State Form 45388 (R3/5-08)

INDIANA GAMING COMMISSION

Approved by State Board of Accounts, 2008

**INSTRUCTIONS:** This report **must** be filed by organizations holding single event licenses, and must be mailed to the Commission within 10 days following your single event.

Organization's name (Please type or print as it appears on your qualification application)			Email address
Address of principal office (number and street; do not enter a P.O. box number)			Federal identification number (FID)
City	State	ZIP code	County
Organization telephone number ( )		Indiana nonprofit tax registration number	
Contact person for your organization		Contact person's phone number ( )	

## REPORT INFORMATION

Enter the single event license number \_\_\_\_\_

What kind of license was used for this single event? (Check One)

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Special Bingo License | <input type="checkbox"/> Raffle License             | <input type="checkbox"/> Calendar Raffle | <input type="checkbox"/> Festival License |
| <input type="checkbox"/> Door Prize License    | <input type="checkbox"/> Charity Game Night License | <input type="checkbox"/> Water Race      | Circle number of days held<br>1 2 3 4     |

Beginning date of single event \_\_\_\_/\_\_\_\_/\_\_\_\_

This report should show all financial and accounting activity related to the single event license checked above. This includes income and expenses related to raffles, door prizes, card or dice games, and the sale of pull tabs, punchboards, and tip boards sold at the event. You must also include income and expenses related to the sale of food, novelties, etc. sold specifically at the event.

## SIGNATURE

I certify under penalty of perjury, that I have examined this report and to the best of my knowledge and belief, it is complete and correct.

_____ Signature of Presiding Officer	_____ Printed name	_____ Title	_____ Daytime telephone number	_____ Date (month, day, year)
_____ Signature of Secretary	_____ Printed name	_____ Daytime telephone number	_____ Date (month, day, year)	

## ENDING INVENTORY STATEMENT

Attach Schedule CG-INV showing ending inventory of your pull tabs, punchboards, and tip boards as of the last day of your accounting period.

Mail the completed report to:

Indiana Gaming Commission, Charity Gaming Division, 101 W. Washington Street, East Tower, Suite 1600, Indianapolis, IN 46204

Telephone: (317) 232-4646

Fax: (317) 232-0117

**INCOME AND EXPENSE SUMMARY**  
(Do not add, change or alter the lines on this form)

**Gross Income**

Income Sources:		Dollars	Cents
Bingo (including Hotball, Pickle Jar, Cookie Jar, etc.) .....	1.		
Pull Tabs .....	2.		
Punchboards .....	3.		
Tip Boards .....	4.		
Charity Game Night (Dice, Cards, or Wheel Games) .....	5.		
Raffle (including 50/50) .....	6.		
Door Prize (Paid attendance/ticket) ..	7.		
Water Race .....	8.		
Guessing Game .....	9.		
Concession Income .....	10.		
Other (Non Gaming Event conducted with license event; i.e. auction, carnival games, etc. Attach list of events) .....	11.		
Other Gross Income (Sale of daubers, other retail items, etc.) .....	12.		
Total Gross Income (Add Lines 1-12)	13.		

**Net Income**

Total Gross Income from Line 13 .	34.		
Total Expenses from Line 33 .....	35.		
Net Proceeds available for Charitable Purposes. (Subtract Line 35 from Line 34.) Carry this number to Line 37 on Page 3 .....	36.		

**Expenses**

Prize/Payouts:		Dollars	Cents
Bingo (including Hotball, Pickle Jar, Cookie Jar, etc.) .....	14.		
Pull Tabs .....	15.		
Punchboards .....	16.		
Tip Boards .....	17.		
Charity Game Night (Dice, Cards, or Wheel Games) .....	18.		
Raffle (including 50/50) .....	19.		
Door Prize .....	20.		
Water Race .....	21.		
Guessing Game .....	22.		
Total Prize/Payout: add Lines 14-22 .....	23.		
<b>Supplies and Equipment:</b>			
Bingo Game Supplies (Cards, Boards, Sheets, Pads) .....	24.		
Pull Tabs, Punchboards, and Tip Board purchases .....	25.		
Other Gaming Supplies (daubers, retails items) .....	26.		
Gaming Equipment/Devices (Roulette Wheel, Bingo Blower, Tables, Chairs, etc.) .....	27.		
<b>Miscellaneous Expenses:</b>			
\$200.00 per day deduction for rent paid to independent lessor of facility (number of gaming days ____ X \$200.00) .....	28.		
License Fees for Event .....	29.		
Concession .....	30.		
Non Gaming Event .....	31.		
Advertising .....	32.		
<b>Total Expenses: add Lines 23 through 32 .....</b>	33.		

## CHARITABLE CONTRIBUTIONS INFORMATION

		Dollars	Cents
37.	Net proceeds from Line 36 of the Income and Expense Summary .....	37.	
38a.	Amount from Line 37 <u>distributed</u> for charitable purposes .....	38a.	
These contributions <u>must</u> be made to organization(s)/(individual(s)) other than your own. Details from these contributions need to be reported on Schedule CG-DIST.			
b.	Amount from Line 37 <u>retained for and/or spent on your organization</u> .....	38b.	
These funds must have been used for the lawful purpose of your organization. A detailed listing of how these funds were spent or were set aside for a specific use should be kept with your records.			
c.	Add the amounts from Lines 38a and 38b and enter total here .....	38c.	
39.	Undistributed balance (Line 37 minus Line 38c) .....	39.	

## LICENSE RENEWAL FEES

The first license fee in any license category is \$50.

For the next license in this same category, the license renewal fee is based on the gross receipts from the previous event held in this category.

Example: An organization paid the \$50 license fee and conducted a raffle event. Later that year, this group wanted to conduct another raffle event. The license fee would be based on the gross receipts from the previous raffle license. This same group wants to conduct a festival event. Because this will be the first time the organization has received a license in the festival license category, the license fee will be \$50.

At least	But Less Than	The renewal fee is:
\$ 0	\$ 15,000	\$ 50
\$ 15,000	\$ 25,000	\$ 100
\$ 25,000	\$ 50,000	\$ 300
\$ 50,000	\$ 75,000	\$ 400
\$ 75,000	\$ 100,000	\$ 700
\$ 100,000	\$ 150,000	\$ 1000
\$ 150,000	\$ 200,000	\$ 1,500
\$ 200,000	\$ 250,000	\$ 1,800
\$ 250,000	\$ 300,000	\$ 2,500
\$ 300,000	\$ 400,000	\$ 3,250
\$ 400,000	\$ 500,000	\$ 5,000
\$ 500,000	\$ 750,000	\$ 6,750
\$ 750,000	\$ 1,000,000	\$ 9,000
\$ 1,000,000	\$ 1,250,000	\$ 11,000
\$ 1,250,000	\$ 1,500,000	\$ 13,000
\$ 1,500,000	\$ 1,750,000	\$ 15,000
\$ 1,750,000	\$ 2,000,000	\$ 17,000
\$ 2,000,000	\$ 2,250,000	\$ 19,000
\$ 2,250,000	\$ 2,500,000	\$ 21,000
\$ 2,500,000	\$ 3,000,000	\$ 24,000
\$ 3,000,000	\$ -----	\$ 26,000

1. **Enter the Total Gross Income** from Line 13 on Page 2 of this form .....
2. Enter allowable facility rental deduction from Line 28 on page 2 of this form ..
3. Subtract Line 2 from Line 1 to determine the adjusted gross income .....
4. Find the amount from #3 on the chart to the left in order to determine the license fee for your next event. Enter the corresponding fee here.

**5. The license fee shown in #4 above is what you must send with the next license application to conduct the same type of event in the future. Make your check from your separate and segregated charity gaming checking account payable to: Indiana Gaming Commission.**